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2007 President's/Chancellor's Compensation Survey for Public Two-Year Institutions

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Name: Dr. Alan Marble Institution: Crowder College Phone: 417 455 5534

Phone: 417.455.5534 Contact Person: Gale Lynch

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 2006	Actual Expend	litures	FY 2007 Estimated Expenditures		
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit
Base salary	\$120,000			\$120,000		
Medical/dental/vision insurance for self	\$3,682			\$3,866		
Medical/dental/vision insurance for spouse/family						
Long-term disability for self						
Deferred compensation						
Retirement benefit	\$14,842			\$15,483		
Other (please specify)						
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$138,524	\$0	\$0	\$139,349	\$0	\$0

Other Compensation:

		FY 2006 Actual Expenditures			Estimated nditures	Estimated Value of Compensation
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	in budget)	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	(not reflected in budget)
Housing						
Utilities						
Housing allowance provided for private rent/lease/purchase						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile						
Automobile allowance (provided for private lease/purchase)						
Automobile (repair/ maintenance/mileage)						
Professional Development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$0	\$0	\$0	\$0	\$0	\$0

Name: Dr. Edward Jackson, President Institution: East Central College

Phone: 636.583.5193 Contact Person: Jon Bauer

Direct Compensation:

	FY 2006	Actual Expend	litures	FY 2007 Estimated Expenditures		
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit
Base salary	\$125,000			\$131,250		
Medical/dental/vision insurance for self						
Medical/dental/vision insurance for spouse/family						
Long-term disability for self						

Deferred compensation						
Retirement benefit	\$14,375			\$15,750		
Other (please specify) Cash value, insurance premiums for self & spouse	\$11,526			\$11,526		
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$150,901	\$0	\$0	\$158,526	\$0	\$0

All items should be annual dollar amounts. For benefits included in the compensation package which provide a value to the president/chancellor and are not easily identified in operating spending (i.e., housing provided on campus), please indicate in the specified column an estimate of the value of the compensation (in the example of housing, this would be the estimated market rent for the property.)

		FY 2006 Actual Expenditures			Estimated nditures	Estimated Value of Compensation
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	(not reflected in budget)
Housing						
Utilities						
Housing allowance provided for private rent/lease/purchase						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile						
Automobile allowance (provided for private lease/purchase)	\$10,800			\$10,800		
Automobile (repair/ maintenance/mileage)						
Professional Development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$10,800	\$0	\$0	\$10,800	\$0	\$0

Name: Mr. William P. McKenna, President FY 2006/Dr. Wayne H. Watts, President FY 2007

Institution: Jefferson College Phone: 636.797.3000 x 120

Contact Person: Dr. Richard Turley, Business Manager

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 2006	Actual Expend	litures	FY 2007 E	Estimated Exper	nditures
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit
Base salary	\$121,102			\$131,735		
Medical/dental/vision insurance for self	\$5,308			\$5,736		
Medical/dental/vision insurance for spouse/family						
Long-term disability for self	\$308			\$240		
Deferred compensation						
Retirement benefit	\$17,147			\$17,181		
Other (please specify)						
Life insurance (\$20,000)	\$70			\$70		
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$143,935	\$0	\$0	\$154,962	\$0	\$0

Other Compensation:

	FY 2006 Actual Expenditures		Estimated Value of	FY 2007 Exper	Estimated Value of Compensation	
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	(not reflected in budget)
Housing						
Utilities						
Housing allowance provided for private rent/lease/purchase						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						

Automobile						
Automobile allowance (provided for private lease/purchase)						
Automobile (repair/ maintenance/mileage)	\$5,700			\$5,700		
Professional Development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
Gas	\$3,001			\$2,000		
Telephone	\$834			\$540		
TOTAL	\$9,535	\$0	\$0	\$8,240	\$0	\$0

Name: Dr. Donald Claycomb, President Institution: Linn State Technical College

Phone: 573.897.5000 Contact Person: John Nilges

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 2006	Actual Expend	litures	FY 2007 E	Estimated Expe	nditures
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit
Base salary	\$118,800			\$135,907		
Medical/dental/vision insurance for self	\$4,359			\$4,977		
Medical/dental/vision insurance for spouse/family						
Long-term disability for self						
Deferred compensation						
Retirement benefit	\$14,957			\$17,369		
Other (please specify)						
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$138,116	\$0	\$0	\$158,253	\$0	\$0

Other Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package which provide a value to the president/chancellor and are not easily identified in operating spending (i.e., housing provided on

campus), please indicate in the specified column an estimate of the value of the compensation (in the example of housing, this would be the estimated market rent for the property.)

		FY 2006 Actual Expenditures			Estimated nditures	Estimated Value of Compensation
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	(not reflected in budget)
Housing						
Utilities						
Housing allowance provided for private rent/lease/purchase						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile	\$7,800			\$7,800		
Automobile allowance (provided for private lease/purchase)						
Automobile (repair/ maintenance/mileage)	\$437			\$457		
Professional Development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$8,237	\$0	\$0	\$8,257	\$0	\$0

Name: Dr. Jacqueline I. Snyder, Chancellor Institution: Metropolitan Community College

Phone: 816.759.1410

Contact Person: Al Tunis 816.759.1020

Direct Compensation:

	FY 2006	Actual Expend	litures	FY 2007 Estimated Expenditures		
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit
Base salary	\$173,160			\$190,000		
Medical/dental/vision insurance for self	\$5,220			\$5,420		
Medical/dental/vision insurance for spouse/family	\$2,532			\$2,765		

Long-term disability for self	\$987			\$1,083		
Deferred compensation						
Retirement benefit	\$20,514			\$22,473		
Other (please specify)						
403B	\$1,000			\$1,000		
Flex Account						
Addt'l life insurance premium	\$539		\$539	\$752		\$752
Additional life insurance	Value \$173,000					
Annuity	Value					
TOTAL	\$203,952	\$0	\$539	\$223,493	\$0	\$752

		006 Actual Estimated Value of Compensation			Estimated nditures	Estimated Value of
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	(not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Compensation (not reflected in budget)
Housing						
Utilities						
Housing allowance provided for private rent/lease/purchase						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment					\$5,000	
Automobile						
Automobile allowance (provided for private lease/purchase)						
Automobile (repair/ maintenance/mileage)	\$2,079			\$2,639		
Professional Development						
Expense for spouse/family to attend meetings	\$2,265			\$1,136		
Club/other memberships						
Other (please specify)						
TOTAL	\$4,344	\$0	\$0	\$3,775	\$5,000	\$0

Name: Mr. Malcolm T. Wilson

Institution: Metropolitan Community College - Blue River

Phone: 816.220.6542

Contact Person: Al Tunis 816.759.1020

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 2006	Actual Expend	litures	FY 2007 Estimated Expenditures		
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit
Base salary	\$136,219			\$140,987		
Medical/dental/vision insurance for self	\$5,220			\$5,420		
Medical/dental/vision insurance for spouse/family						
Long-term disability for self	\$776			\$804		
Deferred compensation						
Retirement benefit	\$16,265			\$16,837		
Other (please specify)						
403B	\$1,000			\$1,000		
Flex Account	\$688			\$983		
Addt'l life insurance premium	\$539		\$539	\$554		\$554
Additional life insurance Additional premium	Value \$136,000					
Annuity	Value					
TOTAL	\$160,707	\$0	\$539	\$166,585	\$0	\$554

Other Compensation:

	FY 2006 Actual Expenditures		Estimated Value of	FY 2007 Exper	Estimated Value of	
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Compensation (not reflected in budget)
Housing						
Utilities						
Housing allowance provided for private						

rent/lease/purchase						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile						
Automobile allowance (provided for private lease/purchase)						
Automobile (repair/ maintenance/mileage)						
Professional Development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
Auto Fluids	\$1,663			\$1,812		
TOTAL	\$1663	\$0	\$0	\$1,812	\$0	\$0

Name: Mr. J. Gary Sage, President

Institution: Metropolitan Community College - Business & Technology

Phone: 816.482.5610

Contact Person: Al Tunis 816.759.1020

Direct Compensation:

	FY 2006	Actual Expend	litures	FY 2007 I	Estimated Exper	nditures
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit
Base salary	\$122,130			\$126,405		
Medical/dental/vision insurance for self	\$4,991			\$5,159		
Medical/dental/vision insurance for spouse/family	\$1,826			\$1,752		
Long-term disability for self	\$696			\$721		
Deferred compensation						
Retirement benefit	\$14,618			\$15,130		
Other (please specify)						
403B	\$1,000			\$1,000		
Addt'l life insurance premium	\$483			\$499		\$499
Additional life	Value					

insurance	\$122,000					
Annuity	Value					
TOTAL	\$145,744	\$0	\$0	\$150,666	\$0	\$499

All items should be annual dollar amounts. For benefits included in the compensation package which provide a value to the president/chancellor and are not easily identified in operating spending (i.e., housing provided on campus), please indicate in the specified column an estimate of the value of the compensation (in the example of housing, this would be the estimated market rent for the property.)

		FY 2006 Actual Expenditures		FY 2007 Exper	Estimated nditures	Estimated Value of Compensation
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	(not reflected in budget)
Housing						
Utilities						
Housing allowance provided for private rent/lease/purchase						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile						
Automobile allowance (provided for private lease/purchase)						
Automobile (repair/ maintenance/mileage)						
Professional Development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
Auto Fluids	\$1,938			\$1,919		
TOTAL	\$1,938	\$0	\$0	\$1,919	\$0	\$0

Name: Dr. Fred L. Grogan, President

Institution: Metropolitan Community College - Longview

Phone: 816.672.2414

Contact Person: Al Tunis, 816.759.1020

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

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	FY 2006	Actual Expend	litures	FY 2007 I	Estimated Exper	nditures
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit
Base salary	\$136,219			\$140,987		
Medical/dental/vision insurance for self	\$5,220			\$5,420		
Medical/dental/vision insurance for spouse/family	\$4,088			\$5,122		
Long-term disability for self	\$776			\$804		
Deferred compensation						
Retirement benefit	\$16,265			\$16,837		
Other (please specify)						
403B	\$1,000			\$1,000		
Addt'l life insurance premium	\$539		\$539	\$554		\$554
Additional life insurance	Value \$136,000					
Annuity	Value					
TOTAL	\$164.107	\$0	\$539	\$170,724	\$0	\$554

		06 Actual nditures	Estimated Value of Compensation		Estimated nditures	Estimated Value of Compensation (not reflected in budget)
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	(not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	
Housing						
Utilities						
Housing allowance provided for private rent/lease/purchase						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile						
Automobile allowance (provided for private lease/purchase)						
Automobile (repair/ maintenance/mileage)						

Professional Development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
Auto Fluids	\$1,940			\$1,682		
TOTAL	\$1,940	\$0	\$0	\$1,682	\$0	\$0

Name: Dr. Merna S. Saliman, President

Institution: Metropolitan Community College - Maple Woods

Phone: 816.437.3046

Contact Person: Al Tunis, 816.759.1020

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 2006	Actual Expend	litures	FY 2007 Estimated Expenditures			
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit	
Base salary	\$136,219			\$140,987			
Medical/dental/vision insurance for self	\$5,220			\$5,420			
Medical/dental/vision insurance for spouse/family	\$2,050			\$2,764			
Long-term disability for self	\$776			\$721			
Deferred compensation							
Retirement benefit	\$16,265			\$16,837			
Other (please specify)							
403B	\$1,000			\$1,000			
Addt'l life insurance premium	\$539		\$539	\$554		\$554	
Additional life insurance	Value \$136,000						
Annuity	Value						
TOTAL	\$162,069	\$0	\$539	\$168,283	\$0	\$554	

Other Compensation:

FY 2006 Actual	Estimated	FY 2007 Estimated	Estimated
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	Exper	nditures	Value of Compensation	Exper	nditures	Value of Compensation
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	(not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	(not reflected in budget)
Housing						
Utilities						
Housing allowance provided for private rent/lease/purchase						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile						
Automobile allowance (provided for private lease/purchase)						
Automobile (repair/ maintenance/mileage)						
Professional Development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
Auto Fluids	\$1,586			\$1,732		
TOTAL	\$1,586	\$0	\$0	\$1,732	\$0	\$0

Name: Dr. E. Bernard Franklin, President

Institution: Metropolitan Community College - Penn Valley

Phone: 816.759.1044

Contact Person: Al Tunis, 816.759.1020

Direct Compensation:

	FY 2006	Actual Expend	litures	FY 2007 Estimated Expenditures		
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit
Base salary	\$136,219			\$140,987		
Medical/dental/vision insurance for self	\$4,991			\$5,158		
Medical/dental/vision insurance for spouse/family	\$1,826			\$1,752		
Long-term disability for self	\$776			\$804		

Deferred compensation						
Retirement benefit	\$16,265			\$16,807		
Other (please specify)						
Add'l life insurance premium	\$539		\$539	\$554		\$554
Additional life insurance	Value \$136,000					
Annuity	Value					
TOTAL	\$160,616	\$0	\$539	\$166,062	\$0	\$554

All items should be annual dollar amounts. For benefits included in the compensation package which provide a value to the president/chancellor and are not easily identified in operating spending (i.e., housing provided on campus), please indicate in the specified column an estimate of the value of the compensation (in the example of housing, this would be the estimated market rent for the property.)

		06 Actual nditures	Estimated Value of		Estimated nditures	Estimated Value of Compensation
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	(not reflected in budget)
Housing						
Utilities						
Housing allowance provided for private rent/lease/purchase						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile						
Automobile allowance (provided for private lease/purchase)						
Automobile (repair/ maintenance/mileage)						
Professional Development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
Auto Fluids	\$1,185			\$1,434		
TOTAL	\$1,185	\$0	\$0	\$1,434	\$0	\$0

Name: Dr. Terry L. Barnes FY2006/Dr. Steven J. Kurtz FY2007

Institution: Mineral Area College

Phone: 573.518.2129 Contact Person: Lisa Clauser

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 2006	Actual Expend	litures	FY 2007 E	Estimated Expe	nditures
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit
Base salary	\$124,515			\$120,000		
Medical/dental/vision insurance for self	\$5,355			\$5,557		
Medical/dental/vision insurance for spouse/family						
Long-term disability for self	\$235			\$184		
Deferred compensation						
Retirement benefit	\$14,935			\$15,067		
Other (please specify)						
Life insurance	\$159			\$159		
Additional life insurance	Value \$4,000					
Annuity	Value \$8,000					
TOTAL	\$157,199	\$0	\$0	\$140,967	\$0	\$0

Other Compensation:

	FY 2006 Actual Expenditures		Estimated Value of Compensation	FY 2007 Exper	Estimated Value of Compensation	
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	(not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	(not reflected in budget)
Housing		_				
Utilities						
Housing allowance provided for private rent/lease/purchase						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						

Automobile						
Automobile allowance (provided for private lease/purchase)						
Automobile (repair/ maintenance/mileage)	\$4,070			\$5,065		
Professional Development						
Expense for spouse/family to attend meetings	\$500					
Club/other memberships						
Other (please specify)						
TOTAL	\$4,570	\$0	\$0	\$5,065	\$0	\$0

Name: Col. Kent Thomas, Chancellor, Missouri State University, West Plains Campus FY2006/FY2007

Dr. Dennis Lancaster, Acting Chancellor, West Plain Campus - effective March 2, 2007

Institution: Missouri State University

Phone: 417.836.4854

Contact Person: Kent Kay, Chief Financial Officer

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 2006	Actual Expend	litures	FY 2007 F	Estimated Expe	nditures
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit
Base salary	\$106,600			\$97,382		
Medical/dental/vision insurance for self	\$4,803			\$4,957		
Medical/dental/vision insurance for spouse/family						
Long-term disability for self	\$181			\$140		
Deferred compensation						
Retirement benefit	\$14,176			\$11,252		
Other (please specify)						
Basic Life Insurance	\$164			\$133		
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$125,924	\$0	\$0	\$113,864	\$0	\$0

Other Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package which provide a value to the president/chancellor and are not easily identified in operating spending (i.e., housing provided on

campus), please indicate in the specified column an estimate of the value of the compensation (in the example of housing, this would be the estimated market rent for the property.)

		06 Actual nditures	Estimated Value of		Estimated nditures	Estimated Value of Compensation
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	(not reflected in budget)
Housing	\$6,041		\$11,000	\$3,413		\$7,105
Utilities	\$4,127			\$3,040		
Housing allowance provided for private rent/lease/purchase						
Housekeeper						
Custodian, groundskeeper	\$4,785			\$2,881		
Insurance for personal property						
Entertainment						
Automobile						
Automobile allowance (provided for private lease/purchase)	\$6,000			\$6,000		
Automobile (repair/ maintenance/mileage)	\$3,394			\$4,053		
Professional Development						
Expense for spouse/family to attend meetings				\$1,073		
Club/other memberships				\$32		
Other (please specify)						
TOTAL	\$24,347	\$0	\$11,000	\$20,492	\$0	\$7,105

Name: Dr. Evelyn E. Jorgenson, President

Institution: Moberly Area Community College

Phone: 660.263.4110, ext 204 Contact Person: Gary D. Steffes

Direct Compensation:

	FY 2006	Actual Expend	litures	FY 2007 Estimated Expenditures		
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit
Base salary	\$126,750			\$132,750		
Medical/dental/vision insurance for self	\$5,033			\$5,263		
Medical/dental/vision insurance for spouse/family						

Long-term disability for self						
Deferred compensation						
Retirement benefit	\$15,155			\$16,562		
Other (please specify)						
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$146,938	\$0	\$0	\$154,575	\$0	\$0

All items should be annual dollar amounts. For benefits included in the compensation package which provide a value to the president/chancellor and are not easily identified in operating spending (i.e., housing provided on campus), please indicate in the specified column an estimate of the value of the compensation (in the example of housing, this would be the estimated market rent for the property.)

	FY 2006 Actual Expenditures		Estimated Value of		Estimated nditures	Estimated Value of Compensation
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	(not reflected in budget)
Housing						
Utilities						
Housing allowance provided for private rent/lease/purchase						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile						
Automobile allowance (provided for private lease/purchase)						
Automobile (repair/ maintenance/mileage)						
Professional Development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
Cellular service	\$755			\$772		
TOTAL	\$755	\$0	\$0	\$772	\$0	\$0

Name: Dr. Neil Nuttall, President

Institution: North Central Missouri College

Phone: 660.359.3948

Contact Person: Sharon Barnett, Ext 500

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 2006	Actual Expend	litures	FY 2007 Estimated Expenditures			
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit	
Base salary	\$115,761			\$120,391			
Medical/dental/vision insurance for self	\$4,732			\$4,891			
Medical/dental/vision insurance for spouse/family							
Long-term disability for self							
Deferred compensation							
Retirement benefit	\$14,378			\$16,560			
Other (please specify)							
Additional life insurance	\$50,000						
Annuity	Value						
TOTAL	\$134,871	\$0	\$0	\$141,842	\$0	\$0	

Other Compensation:

	FY 2006 Actual Expenditures		Estimated Value of Compensation		Estimated nditures	Estimated Value of Compensation
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	(not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	(not reflected in budget)
Housing						
Utilities						
Housing allowance provided for private rent/lease/purchase						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment		\$1,200			\$1,200	

Automobile						
Automobile allowance (provided for private lease/purchase)	\$7,200			\$7,200		
Automobile (repair/ maintenance/mileage)		\$3,000			\$3,000	
Professional Development						
Expense for spouse/family to attend meetings		\$2,000			\$2,000	
Club/other memberships	\$500			\$500		
Other (please specify)						
Medical Exam	\$500			\$500		
TOTAL	\$8,200	\$6,200	\$0	\$8,200	\$6,200	\$0

Name: Dr. Norman Myers FY 2006/Dr. Hal Higdon, President FY 2007

Institution: Ozarks Technical Community College

Phone: 417.447.4835

Contact Person: Marla Moody

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 2006	Actual Expend	litures	FY 2007 E	Estimated Exper	nditures
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit
Base salary	\$158,508			\$153,746		
Medical/dental/vision insurance for self	\$4,157			\$4,700		
Medical/dental/vision insurance for spouse/family				\$8,581		\$8,581
Long-term disability for self	\$290			\$267		
Deferred compensation						
Retirement benefit	\$47,823		\$23,700	\$19,877		
Other (please specify)						
Group Term Life Insurance	\$210			\$186		
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$210,988	\$0	\$23,700	\$187,357	\$0	\$8,581

Other Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package which provide a value to the president/chancellor and are not easily identified in operating spending (i.e., housing provided on

campus), please indicate in the specified column an estimate of the value of the compensation (in the example of housing, this would be the estimated market rent for the property.)

		06 Actual nditures	Estimated Value of Compensation		Estimated nditures	Estimated Value of Compensation
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations) (not reflected in budget) (permitted in budg	Private Funds (e.g. Institution Foundations)	(not reflected in budget)		
Housing						
Utilities						
Housing allowance provided for private rent/lease/purchase	\$13,200			\$10,994		
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile						
Automobile allowance (provided for private lease/purchase)	\$10,200					
Automobile (repair/ maintenance/mileage)	\$6,012			\$2,286		
Professional Development	\$16,265			\$17,161		
Expense for spouse/family to attend meetings	\$838			\$450		
Club/other memberships	\$665			\$1,079		
Other (please specify)						
Medical Exam	\$1,268					
Cell Phone Reimb.	\$480					
TOTAL	\$48,928	\$0	\$0	\$31,970	\$0	\$0

Name: Dr. John McGuire, President

Institution: St. Charles Community College

Phone: 636.922.8300

Contact Person: Donna Davis, AVP for Human Resources

Direct Compensation:

	FY 2006	Actual Expend	litures	FY 2007 Estimated Expenditures		
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit
Base salary	\$143,488			\$150,663		
Medical/dental/vision insurance for self	\$4,465			\$4,942		

Medical/dental/vision insurance for spouse/family						
Long-term disability for self	\$367			\$367		
Deferred compensation						
Retirement benefit	\$16,501			\$18,080		
Other (please specify)						
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$164,821	\$0	\$0	\$174,052	\$0	\$0

		FY 2006 Actual Expenditures			Estimated nditures	Estimated Value of Compensation
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	in budget)	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	(not reflected in budget)
Housing						
Utilities						
Housing allowance provided for private rent/lease/purchase						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile						
Automobile allowance (provided for private lease/purchase)	\$9,000			\$9,000		
Automobile (repair/ maintenance/mileage)						
Professional Development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$9,000	\$0	\$0	\$9,000	\$0	\$0

Institution: St. Louis Community College

Phone: 314.539.5208

Contact Person: Ron Portman

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 2006	Actual Expend	litures	FY 2007 E	Estimated Exper	nditures
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit
Base salary	\$183,416			\$194,421		
Medical/dental/vision insurance for self	\$5,426			\$5,856		
Medical/dental/vision insurance for spouse/family	\$5,350			\$5,776		
Long-term disability for self	\$420			\$420		
Deferred compensation	\$15,000		\$15,000	\$15,000		\$15,000
Retirement benefit	\$21,717			\$24,033		
Other (Unused Vacation)	\$28,947		\$28,947	\$12,720		\$12,720
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$260,276	\$0	\$43,947	\$258,226	\$0	\$27,720

Other Compensation:

	FY 2006 Actual Expenditures		Estimated Value of	FY 2007 Exper	Estimated Value of Compensation	
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	(not reflected in budget)
Housing						
Utilities						
Housing allowance provided for private rent/lease/purchase						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						

Automobile						
Automobile allowance (provided for private lease/purchase)						
Automobile (repair/ maintenance/mileage)	\$1,833			\$1,689		
Professional Development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$1,833	\$0	\$0	\$1,689	\$0	\$0

Name: Ms. Marcia Pfeiffer, President

Institution: St. Louis Community College at Florissant Valley

Phone: 314.539.5208

Contact Person: Ron Portman

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 2006	Actual Expend	litures	FY 2007 E	Estimated Expe	nditures
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit
Base salary	\$116,773			\$120,860		
Medical/dental/vision insurance for self	\$5,426			\$5,856		
Medical/dental/vision insurance for spouse/family						
Long-term disability for self	\$420			\$420		
Deferred compensation						
Retirement benefit	\$14,053			\$15,206		
Other (please specify)						
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$136,672	\$0	\$0	\$142,342	\$0	\$0

Other Compensation:

		FY 2006 Actual Expenditures			Estimated nditures	Estimated Value of Compensation
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)		Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	(not reflected in budget)
Housing						
Utilities						
Housing allowance provided for private rent/lease/purchase						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile						
Automobile allowance (provided for private lease/purchase)						
Automobile (repair/ maintenance/mileage)	\$2,598			\$2,145		
Professional Development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$2,598	\$0	\$0	\$2,145	\$0	\$0

Name: Dr. Morris Johnson

Institution: St. Louis Community College at Forest Park

Phone: 314.539-5208

Contact Person: Ron Portman

Direct Compensation:

	FY 2006	Actual Expend	litures	FY 2007 Estimated Expenditures		
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit
Base salary	\$115,000			\$119,025		
Medical/dental/vision insurance for self	\$5,430			\$5,856		
Medical/dental/vision insurance for spouse/family						
Long-term disability for self	\$420			\$420		
Deferred						

compensation						
Retirement benefit	\$13,849			\$14,986		
Other (please specify)						
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$134,699	\$0	\$0	\$140,287	\$0	\$0

All items should be annual dollar amounts. For benefits included in the compensation package which provide a value to the president/chancellor and are not easily identified in operating spending (i.e., housing provided on campus), please indicate in the specified column an estimate of the value of the compensation (in the example of housing, this would be the estimated market rent for the property.)

		06 Actual nditures	Estimated Value of		Estimated nditures	Estimated Value of
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Compensation (not reflected in budget)
Housing						
Utilities						
Housing allowance provided for private rent/lease/purchase						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile						
Automobile allowance (provided for private lease/purchase)						
Automobile (repair/ maintenance/mileage)	\$1,972			\$1,185		
Professional Development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$1,972	\$0	\$0	\$1,185	\$0	\$0

Name: Dr. E. Lynn Suydam, President FY 2006 (Retired-calculations for 6 1/2 months for FY 2007)

Dr. Ann Divine, Acting President for 5 1/2 months FY 2007 Institution: St. Louis Community College at Meramec

Phone: 314.539.5208

Contact Person: Ron Portman

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 2006	Actual Expend	litures	FY 2007 E	Estimated Expe	nditures
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit
Base salary	\$123,159			\$125,445		
Medical/dental/vision insurance for self	\$5,426			\$5,856		
Medical/dental/vision insurance for spouse/family	\$5,350			\$5,776		
Long-term disability for self	\$420			\$420		
Deferred compensation						
Retirement benefit	\$14,787			\$16,053		
Other (please specify)						
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$149,142	\$0	\$0	\$153,550	\$0	\$0

Other Compensation:

	FY 2006 Actual Expenditures		Estimated Value of Compensation		Estimated nditures	Estimated Value of Compensation
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)		Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	(not reflected in budget)
Housing						
Utilities						
Housing allowance provided for private rent/lease/purchase						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile						
Automobile allowance (provided for private lease/purchase)						

Automobile (repair/ maintenance/mileage)	\$1,677			\$1,764		
Professional Development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$1,677	\$0	\$0	\$1,764	\$0	\$0

Name: Dr. Marsha Drennon, President

Institution: State Fair Community College

Phone: 660.596.7825 Contact Person: Jauhn Nash

Direct Compensation:

All items should be annual dollar amounts. For benefits included in the compensation package for the president/chancellor which exceed those provided for all other employees (other than base salary) indicate the amount of the extra compensation in the specified column.

	FY 2006	Actual Expend	litures	FY 2007 Estimated Expenditures		
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit
Base salary	\$128,500			\$132,500		
Medical/dental/vision insurance for self	\$4,683			\$5,034		
Medical/dental/vision insurance for spouse/family						
Long-term disability for self						
Deferred compensation						
Retirement benefit	\$14,663			\$15,900		
Other (please specify)						
Reimbursement limit for promoting SFCC		\$3,000				
Life insurance (based on annual salary - benefit given to all full time employees)	\$392			\$415		
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$148,238	\$3,000	\$0	\$153,849	\$0	\$0

Other Compensation:

		FY 2006 Actual Expenditures			Estimated nditures	Estimated Value of Compensation
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Compensation (not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	(not reflected in budget)
Housing						
Utilities						
Housing allowance provided for private rent/lease/purchase						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment						
Automobile						
Automobile allowance (provided for private lease/purchase)						
Automobile (repair/ maintenance/mileage)						
Professional Development						
Expense for spouse/family to attend meetings						
Club/other memberships						
Other (please specify)						
TOTAL	\$0	\$0	\$0	\$0	\$0	\$0

Name: Dr. John F. Cooper, President

Institution: Three Rivers Community College

Phone: 573.840.9663

Contact Person: Robbie Myers

Direct Compensation:

	FY 2006	Actual Expend	litures	FY 2007 Estimated Expenditures		
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	Amount Above Standard Benefit
Base salary	\$137,933			\$140,933		
Medical/dental/vision insurance for self	\$4,576			\$4,576		
Medical/dental/vision insurance for spouse/family	\$156			\$156		
Long-term disability for self						

Deferred compensation						
Retirement benefit	\$21,928		\$5,000	\$22,493		\$5,000
Other (please specify)						
Additional life insurance	Value					
Annuity	Value					
TOTAL	\$164,593	\$0	\$5,000	\$168,158	\$0	\$5,000

		06 Actual nditures	Estimated Value of Compensation		Estimated nditures	Estimated Value of Compensation
	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	(not reflected in budget)	Institutional Operating Funds	Private Funds (e.g. Institution Foundations)	(not reflected in budget)
Housing						
Utilities						
Housing allowance provided for private rent/lease/purchase						
Housekeeper						
Custodian, groundskeeper						
Insurance for personal property						
Entertainment	\$2,300			\$2,500		
Automobile	Use Fleet Car			Use Fleet Car		
Automobile allowance (provided for private lease/purchase)						
Automobile (repair/ maintenance/mileage)						
Professional Development						
Expense for spouse/family to attend meetings						
Club/other memberships	\$580			\$620		
Other (please specify)						
TOTAL	\$2,880	\$0	\$0	\$3,120	\$0	\$0

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